

Massachusetts Case Mix

Hospital Emergency Department Data (EDD)

Fiscal Year 2020

Documentation Manual



Massachusetts Case Mix FY 2020 Hospital Emergency Department Data

USER GUIDE

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Executive Summary

Each quarter, Massachusetts facilities provide to CHIA data collected from emergency departments about visits that did not end in an inpatient admission or outpatient observation stay. The FY2020 Emergency Department Database (EDD) includes emergency department visits that occurred between October 1, 2019 and September 30, 2020. Facilities reported a total of 1,980,695 visits.

The FY2020 EDD Guide provides general information about CHIA's most recent emergency department holdings. This information includes high level data notes (data collection, data application, and use) and a codebook (data element list, data dictionary, reference tables, and summary statistics).

Part A. Data Collection

Select facilities in Massachusetts are required to submit ED visit data to CHIA under 957 CMR 8.00 - APCD and Case Mix Data Submission and Regulation 957 CMR 5.00: Health Care Claims, Case Mix and Charge Data Release Procedures. Researchers can access EDD regulations by visiting CHIA's web site at <http://www.chiamass.gov/regulations>.

957 CMR 8.00 - APCD and Case Mix Data Submission requires facilities to submit visit data to CHIA 75 days after each quarter. The quarterly reporting intervals for the FY2020 EDD are as follows:

- **Quarter 1: October 1, 2019 - December 31, 2019**
- **Quarter 2: January 1, 2020 – March 31, 2020**
- **Quarter 3: April 1, 2020 – June 30, 2020**
- **Quarter 4: July 1, 2020 – September 30, 2020**

CHIA reviews each facility's quarterly data for compliance with **957 CMR 8.00 - APCD and Case Mix Data Submission** using a one percent error rate. The one percent error rate is based upon the presence of one or more errors per visit for the facility's quarterly submission. CHIA checks for valid codes, correct formatting, and presence of the required data elements. If one percent or more of the visits are rejected, CHIA rejects the entire quarterly submission.

Each facility receives a quarterly error report displaying invalid visit information. Quarterly data that did not meet the one percent compliance standard must be resubmitted by the reporting facility until the standard is met.

Defining Emergency Department

Regulation *105 CMR 130.020* defines what types of facilities are considered "Emergency Departments" and what is (and is not) a visit. The Hospital Uniform Reporting Manual (HURM) defines additional emergency services and also defines the regulations for emergency services under Massachusetts General Laws. Functional reporting permits comparisons among facilities with varied organizational structures which can be found in the *HURM*, Chapter III, § 3242.

An emergency department is defined as a department of a hospital or an off-site health care facility that provides emergency services as defined in *105 CMR 130.020*. The emergency department must be listed on the license of the hospital and qualify as a Satellite Emergency Facility as defined in *105 CMR 130.820* through *130.836*.

Visits in Other CHIA Databases

Any visit for which the patient was registered in the emergency department that did not result in an outpatient observation stay or an inpatient admission at the reporting facility is considered an emergency department visit. A visit occurs even if the only service provided to a registered patient is triage or screening. Data users interested in visits that resulted in an observation stay should use the outpatient observation database (FY2020 OOD). Data users interested in visits that resulted in an inpatient admission should use the hospital inpatient discharge database (FY2020 HIDD). Both the OOD and HIDD databases have an "ED Indicator" flag which identifies care that begins in the ED. The "Source of Admission" codes in OOD and HIDD and "Revenue" codes in HIDD can be used to identify stays or discharges that included emergency department services. In

addition, the OOD now contains ED registration and ED discharge date for boarding time for ED visits that result in an observation stay, likewise HIDD contains ED registration and ED discharge date and boarding time for ED visits that result in an inpatient hospital admission.

EDD Verification Report Process

CHIA sends each facility a profile report of their visit data to maintain and improve the quality of their data submissions. The Verification Report process gives the facilities the opportunity to review the data they have provided to CHIA and affirm data accuracy and completeness.

CHIA produces facility specific Verification Reports at year-end. CHIA asks each facility to review and verify the data contained within the report. Each Verification Report has a series of frequency tables for selected data elements that include, but not limited to, the number of visits per month and breakouts by admission type, admission source, patient race, and patient disposition.

Facilities must affirm that reported data is accurate and complete or identify any discrepancies on the year-end verification cycle. Facilities certify the accuracy and completeness of their data by completing a Verification Report Response form. CHIA accepts two response types from facilities:

A: A facility indicates its agreement that the data appearing on the Verification Report is accurate and that it represents the facility's case mix profile.

B: A facility indicates that the data on the report is accurate except for the discrepancies noted. If any data discrepancies exist, CHIA requests that facilities provide written explanations of the discrepancies.

Users interested in the FY2020 EDD Verification Reports should contact CHIA at CaseMix.data@state.ma.us. Please indicate the fiscal year of the Verification Report, the dataset name, and if the information is needed for a specific facility or set of facilities.

Part B: Applying for and Using CHIA Data

Researchers interested in receiving approval to access CHIA data should follow the instructions below to apply for the data. Due to the custom nature of each data use request, limited information covering all data uses is provided by CHIA. Data applicants needing additional assistance on the application process or using the data should contact CHIA at CaseMix.data@state.ma.us.

How to Apply for the Data

- To obtain a copy of the Application Form, Data Use Agreement, Data Management Plan and/or other documents required for application, go to: <http://www.chiamass.gov/chia-data/>
- Follow the links to the forms that correspond to the data (Case Mix, MA APCD) and application type (Government, Non-Government) that are appropriate to the data request.
- Information on the Hospital Case Mix and Charge Data Fee Schedule is available at the following link: <https://www.chiamass.gov/assets/docs/g/chia-ab/1705.pdf>
- All application documents must be submitted to CHIA and are managed through IRBNet.org. Instructions for submitting application materials through IRBNet are available on the following link: <https://www.chiamass.gov/assets/Uploads/data-apps/Application-Submission-IRBNet-Tutorial.pdf>
- Non-Government applicants can request approval to use a pre-configured Limited Data Set (LDS), designed to protect patient data confidentiality while ensuring analytic utility. This streamlined dataset also improves CHIA's ability to deliver the data efficiently.
- The data contained in Case Mix databases include personal information and Protected Health Information, the release of which is restricted by state and federal laws and regulations. The application process has been designed to help applicants prepare applications that will allow for the release of data while protecting patient privacy. For this reason, applicants should familiarize themselves with CHIA's APCD and Case Mix Data Release Regulation (957 CMR 5.00) and the forms and other background information referenced above.

Securing CHIA Data Prior to Use

Approved data recipients or agents for data recipients are obliged by the application and confidentiality agreement to secure the data in a manner that protects the confidentiality of the records and complies fully with the terms of CHIA's Data Use Agreement. All data obtained from CHIA must reside on an encrypted hard drive and/or secure network.

Data Delivery

CHIA delivers EDD on CD-ROMs. Data users must be able to meet the following Hardware and CD requirements. Users must also be able to read and download the data files to their back office.

Hardware Requirements:

- CD ROM Device
- Encrypted Hard Drive with 2.0 GB of space available

Data Use

The FY2020 EDD consists of up to 9 Microsoft Access Database (.mdb) files or 10 SAS files (.sas7bdat). Each file name will have a suffix of “_Full_AAAA_BBBB”. AAAA indicates the specific view of the data. BBBB indicates if the data is an LDS or Government dataset.

- The main FIPA_EDD_2020_Visit (table name: Visit), contains one record per ED visit. The unique identifier on this table is the RecordType20ID.
- FIPA_EDD_2020_Service (table name: Service), contains one record per service code (HCPCS or CPT) reported for each visit and service line item charges rounded to the nearest dollar. The Visit table (RecordType20ID) has a one-to-many relationship with this table.
- FIPA_EDD_2020_DiagnosisCode (table name: DiagnosisCode), contains one record per ICD-10-CM diagnosis code reported for each visit. The Visit table has a one-to-many relationship with this table by linking the RecordType20ID.
- FIPA_EDD_2020_ProcedureCode (table name: ProcedureCode), contains one record per procedure code (CPT or ICD-10-PCS) for each visit. The Visit table has a one-to-many relationship with this table by linking the RecordType20ID.
- FIPA_EDD_2020_Organization (table name: Organization) contains one record per ED organization. This table can be used to lookup facility names, EMS region, and teaching status.
- FIPA_EDD_2020_PayerCategory (table name: PayerCategory) contains one record per ED payer.
- FIPA_EDD_2020_SubmissionLog (table name: Submission Log) contains one record per quarter for each of the ED facilities filing data.
- FIPA_EDD_2020_ErrorLog (table name: ErrorLog) contains records by quarter and by fiscal year on the number of records that pass and fail and the reason for fail by IdOrgFiler.
- FIPA_EDD_2020_ServiceSummary (table name: ServiceSummary), contains one record per quarter per facility. The Visit table (RecordType20ID) has a many-to-one relationship with this Table.

Linking Files

Historically, case mix data users receive a Microsoft Access version of the data. Many users import the data into SQL, STATA™, SPSS™, SAS™, or R for analysis or data management. To accommodate the one-to-many relationship between the main ED Visit table and Services, DiagnosisCode and ProcedureCode tables, all four tables contain a **RecordType20ID** field. The RecordType20ID field is a unique identifier used to link the main Visit table to Services, Diagnoses and Procedures tables. The OrgID field in the Organization table can be linked to columns on the Visit table fields that contain Organization ID numbers (IdOrgFiler, IdOrgSite, IdOrgHosp and IdOrgTransfer).

Part C: Data Elements

The following section should provide the user with an explanation of some of the data. For more information about specific data elements, facility reporting thresholds, or other questions about the data, please contact CHIA at CaseMix.data@state.ma.us.

About the Limited Data Set (LDS)

The pre-configured Limited Data Set (LDS) is designed to protect patient data confidentiality while ensuring analytic utility. All approved data applicants receive the “core” data elements. Data applicants seeking approval to add to the “core” elements must indicate this by selecting from the list of “buy-ups.” An applicant could use the “Buy-up” process to receive more granular data. For example, the user can request a “buy-up” to a 5 digit patient ZIP code instead of a 3 digit patient ZIP code. CHIA must review buy-up requests and may approve the request based on the project description. CHIA makes an additional set of core elements available only to government data applicants. Government data applicants must specifically identify requested Government-Only elements in their application and provide justification for their request.

Master Data Elements List

For the FY2020 EDD, CHIA provides a master data elements list by table. Not every approved data applicant has access to every data element – some are reserved for limited dataset buy-ups or for approved government use. All approved data applicants have access to the “CORE” data. Data applicants who choose limited dataset buy-ups may receive access to some “LDS” elements. Only government data applicants may request the “GOV” fields. Data applicants interested in purchasing the data should visit the CHIA website for instructions.

VISIT TABLE—CORE ELEMENTS

| | | |
|-------------------|--------------------------------|--------------------------|
| AgeLDS | LengthOfStayHours | RegistrationMonth |
| Charges | NewbornAgeWeeks | RegistrationYear |
| DaysBetweenVisits | OtherCareGiver | SecondaryPayerType |
| DepartureStatus | PermanentPatientCountryLDS | SecondarySourceOfPayment |
| DischargeDay | PermanentPatientStateLDS | SecondarySourceOfVisit |
| DNRStatus | PrimaryPayerType | SexLDS |
| EDVisitID | PrimarySourceOfPayment | SourceOfVisit |
| EmergencySeverity | PrincipalConditionPresent | SubmissionControlID |
| HispanicIndicator | PrincipalDiagnosisCode | TemporaryPatientStateLDS |
| Homeless | PrincipalECode | Transport |
| IdOrgFiler | PrincipalECodeConditionPresent | TypeOfVisit |
| IdOrgHosp | ProcedureCodingType | VisitPassed |

| | |
|---------------|-----------------|
| IdOrgSite | RecordType20ID |
| IdOrgTransfer | RegistrationDay |

VISIT TABLE—LDS ELEMENTS

| | | |
|-----------------------|-----------------------------|-----------------------------|
| DischargeDate | PermanentPatientCityLDS | RegistrationMonthMM |
| DischargeDateMM | PermanentPatientZIP3CodeLDS | TemporaryPatientCityLDS |
| Ethnicity1 | PermanentPatientZIP5CodeLDS | TemporaryPatientZIP3CodeLDS |
| Ethnicity2 | PhysicianNumber | TemporaryPatientZIP5CodeLDS |
| LegacyCHIAMothersUHIN | Race1 | VisitSequence |
| LegacyCHIAPatientUHIN | Race2 | |
| OtherPhysicianNumber | RegistrationDate | |

VISIT TABLE—GOVERNMENT-ONLY ELEMENTS

| | |
|---------------------|------------------|
| AmbulanceRunSheet | OtherEthnicity |
| DischargeTime | OtherRace |
| HospitalBillNumber | PatientBirthDate |
| MedicaidMemberID | RegistrationTime |
| MedicalRecordNumber | |

DIAGNOSIS CODE TABLE—CORE ELEMENTS

| |
|---------------------|
| ConditionPresent |
| DiagnosisCode |
| PrincipallIndicator |
| RecordType20ID |
| Sequence |

PROCEDURE CODE TABLE—CORE ELEMENTS

| |
|----------------|
| ProcedureCode |
| RecordType20ID |
| Sequence |

SERVICES CODE TABLE – CORE ELEMENTS

| |
|------------------------|
| ServiceLineItem |
| RecordType20ID |
| ServiceLineItemCharges |

SERVICE SUMMARY TABLE—CORE ELEMENTS

| | |
|-----------------------------|-----------------------|
| InpatientVisits | SubmissionControlID |
| ObservationBeds | SubmissionQuarter |
| OrgID | TotalEDBeds |
| OutpatientObservationVisits | TotalRegisteredVisits |
| ServiceSiteSummaryKey | TreatmentBeds |

ORGANIZATION TABLE—CORE ELEMENTS

| | |
|---------------------|--------------------|
| City | OrganizationName |
| DateInactive | OrganizationNumber |
| EMSRegion | OrganizationTypeID |
| GroupName | TeachingStatus |
| OrganizationGroupID | Type |

PAYER CATEGORY—CORE ELEMENTS

| | |
|-------------------------|-----------------------|
| PayerManagedCareCode | PayerSourceCode |
| PayerMCareMCaidPrivCode | PayerSourceDefinition |
| PayerCategory | PayerTypeCode |
| Description | PayerTypeAbbreviation |
| PayerTypeDescription | |

Organization Table

The “Organization” table contains 1 record for every valid OrgId reported in the ED visit database. Referenced OrgId’s include: IdOrgFiler, IdOrgHosp, IdOrgSite, and IdOrgTransfer data elements in the ED database. The OrgIds referenced in FY2020 EDD are listed in Table 1.

Table 1. ORGANIZATION IDENTIFICATION

| | |
|--------------------------------|---|
| Principal Data Element: | ORGID FIELDS |
| Other Data Elements: | IdOrgFiler IdOrgHosp IdOrgSite IdOrgTransfer |
| Rules: | The Organization Table will contain 1 record for every valid OrgId reported in the ED visit database. The following table lists Facilities only for submissions in a recent year. |

Note: The organization table contains information on all organizations submitting data and other organizations transferring patients to organizations. Below is a list of the 70 organizations submitting emergency data in FY2020.

| ORGID | ORGANIZATION NAME |
|-------|---|
| 1 | Anna Jaques Hospital |
| 2 | Athol Memorial Hospital |
| 3 | North Shore Medical Center – Union Campus |
| 4 | Baystate Medical Center |
| 5 | Baystate Franklin Medical Center |

| ORGID | ORGANIZATION NAME |
|-------|--|
| 6 | Baystate Mary Lane Outpatient Center, Satellite Emergency Facility |
| 7 | Berkshire Health System - Berkshire Campus |
| 8 | Fairview Hospital |
| 10 | Beth Israel Deaconess Medical Center - East Campus |
| 16 | Boston Medical Center |
| 22 | Brigham and Women's Hospital |
| 25 | Signature Healthcare - Brockton Hospital |
| 27 | Cambridge Health Alliance – Cambridge Hospital Campus |
| 39 | Cape Cod Hospital |
| 40 | Falmouth Hospital |
| 41 | Steward - Norwood Hospital |
| 42 | Steward - Carney Hospital |
| 46 | Children's Hospital Boston |
| 49 | MetroWest Medical Center - Framingham Campus |
| 50 | Cooley Dickinson Hospital |
| 53 | Beth Israel Deaconess Hospital - Needham |
| 57 | Emerson Hospital |
| 59 | Brigham and Women's - Faulkner Hospital |
| 62 | Steward - Good Samaritan Medical Center - Brockton Campus |
| 68 | Harrington Memorial Hospital |
| 71 | Health Alliance – Leominster Campus |
| 73 | Heywood Hospital |
| 75 | Steward - Holy Family Hospital |
| 77 | Holyoke Medical Center |
| 79 | Beth Israel Deaconess – Plymouth (Jordan) |
| 81 | Lahey Hospital & Medical Center -- Burlington Campus |
| 83 | Lawrence General Hospital |
| 85 | Lowell General Hospital – Main Campus |

| ORGID | ORGANIZATION NAME |
|-------|---|
| 88 | Martha's Vineyard Hospital |
| 89 | Massachusetts Eye and Ear Infirmary |
| 91 | Massachusetts General Hospital |
| 97 | Milford Regional Medical Center |
| 98 | Beth Israel Deaconess - Milton |
| 99 | Steward - Morton Hospital |
| 100 | Mount Auburn Hospital |
| 101 | Nantucket Cottage Hospital |
| 104 | Tufts-New England Medical Center |
| 105 | Newton-Wellesley Hospital |
| 106 | Baystate Noble Hospital |
| 109 | Lahey Health - Addison Gilbert Campus |
| 110 | Lahey Health - Beverly Campus |
| 114 | Steward - Saint Anne's Hospital |
| 115 | Lowell General - Saints Campus |
| 116 | North Shore Medical Center, Inc. - Salem Campus |
| 119 | Mercy Medical Center - Springfield Campus |
| 122 | South Shore Hospital |
| 123 | Southcoast Hospitals Group - Charlton Memorial Campus |
| 124 | Southcoast Hospitals Group - St. Luke's Campus |
| 126 | Steward - St. Elizabeth's Medical Center |
| 127 | Saint Vincent Hospital |
| 129 | Sturdy Memorial Hospital |
| 130 | UMass Memorial Medical Center - Memorial Campus |
| 131 | UMass Memorial Medical Center - University Campus |
| 132 | Health Alliance - Clinton Hospital |
| 133 | Marlborough Hospital |
| 138 | Lahey Winchester Hospital |

| ORGID | ORGANIZATION NAME |
|-------|--|
| 139 | Baystate Wing Memorial Hospital |
| 141 | Melrose-Wakefield Healthcare - Melrose-Wakefield Hospital Campus |
| 142 | Cambridge Health Alliance - Everett (Whidden) Hospital Campus |
| 143 | Cambridge Health Alliance – Somerville Campus |
| 145 | Southcoast Hospitals Group - Tobey Campus |
| 457 | MetroWest Medical Center - Leonard Morse Campus |
| 4448 | Lahey Medical Center, Peabody |
| 11466 | Steward - Holy Family at Merrimack Valley |
| 11467 | Steward - Nashoba Valley Medical Center |

Organization of the Diagnosis and Procedure Codes

CHIA organizes the procedure and diagnosis fields into four tables—Visit, Diagnosis, Procedure (CPT-4 or ICD-10-CM procedure codes) and Services (CPT-4 or HCPCS procedure codes). The Visit table contains the first diagnosis code on the record (which cannot be an ICD-10-CM external cause code **V00-Y99**). All other diagnosis and all procedure codes are contained in the Diagnosis and Procedure tables, respectively. Indicator codes are available for each secondary diagnosis or procedure code and are based on order in which those codes were sent to CHIA.

Diagnoses and procedures are ordered as submitted by emergency departments to CHIA. CHIA does not require the order of diagnoses and procedures to be medically relevant. CHIA does not affirm or confirm the medical relevancy of the principal diagnosis, procedure, or external cause codes.

Organization Identifiers (OrgID)

FY2020 EDD contains four organization identifier fields. These fields are a CHIA assigned unique code for each Massachusetts facility:

- **Massachusetts Filer Organization ID (IdOrgFiler):** The Organization ID for the facility that submitted the ED visit data to CHIA.
- **Massachusetts Site Organization ID (IdOrgSite):** The Organization ID for the site where the patient received ED care.
- **Massachusetts Hospital Organization ID (IdOrgHosp):** The Organization ID for the main hospital affiliation. For example 3108 (Cambridge Health Alliance) is the IdOrgHosp for the IdOrgSite 142 (Everett Hospital).
- **Massachusetts Transfer Hospital Organization ID (IdOrgTransfer):** The Organization ID for the facility from which a patient is transferred. If the patient is transferred from outside of Massachusetts, the IdOrgTransfer will be 9999999.

Most facilities provide emergency care at only one location. Therefore, they are considered to have a single campus or site, and need to summarize their data only once. However, facilities may have submitted data about care provided at multiple sites. CHIA requires the latter to summarize their data separately.

Age LDS

If the date of birth and admission date are valid, then CHIA calculated Age LDS in years. The calculation was as follows:

- Age is calculated to be the rounded integer value – of the difference between Date of Birth and Discharge date.
- If Age is valid and < 1 year, then AgeLDS = 0
- If Age is valid and => 1 year and < 90 years, then AgeLDS = a year between 1 and 89
- If Age is valid and > 89 and <= 115, AgeLDS = 999
- If Age is missing, negative value, or value > 115, then AgeLDS = null

Discretion should be used whenever a questionable age assignment is noted. Researchers are advised to consider other data elements in their analysis of this field.

Data Limitations

The EDD is derived from patient visit summaries, which can be traced to information gathered upon ED registration or from information entered by admitting and attending health professionals into the medical record. The quality of the EDD depends on facility data collection policies and coding practices of the medical record staff.

Information may not be entirely consistent from facility to facility due to differences in:

- Collection and verification of patient supplied information before or at admission,
- Medical record coding, consistency, and/or completeness,
- Extent of facility data processing capabilities,
- Flexibility of facility data processing systems,
- Capacity of financial processing system to record late occurring charges on CHIA's electronic submission,
- Non-comparability of data collection and reporting

Historical Data Elements

Users of multiple years of Case Mix data should be careful when merging multiple years of data. In order to maintain consistency across years, users may need to merge some codes used for specific data elements. For example, keep in mind the transition from ICD-9-CM to ICD-10-CM/PCS which began in FY2015 (October 2015) and the change in race/ethnicity coding rubric which began in FY2007 (October 2007). Users with questions about new data elements or changes in coding from year to year should contact CHIA at CaseMix.data@state.ma.us.

Data Dictionary

FY2020 EDD data dictionary provides metadata for the following attributes:

- *Data Element*: name as it appears in the file
- *Short description*: to help users understand what the element contains
- *Primary table*: the main table (MS ACCESS) or file (SAS) that the data element will appear in
- *Linking tables*: other tables that contain the data element
- *Availability to users*: indicates if the data is available to all users (“CORE”), a buy-up (“LDS”), or available only to government (“GOV”)
- *Type of Data*: describes if the data element is Categorical, Ordinal, Currency, an Identifier, Continuous, Date/Time, or Open Text
- *Format*: indicates if the data is formatted in a specific fashion
- *CHIA derived or calculated*: indicates if the field was created by CHIA
- *Reference table*: indicates if a Categorical data element has a set of valid values that are associated with other information
- *Description*: is a longer explanation of the data element and its limitations
- *Summary statistics*: links to frequencies or means for that data element

Users of the data with additional questions about any specific data element should contact CHIA at CaseMix.data@state.ma.us.

Active

| | |
|-------------------------------|--|
| Short Description | CHIA processing field. |
| Primary Table: | SubmissionLog |
| Availability to Users: | CORE |
| Type of Data: | Categorical |
| Format: | Varchar |
| Length: | 3 |
| Description: | CHIA indicator of quarterly submission status. |

AgeLDS

| | |
|-------------------------------|---|
| Short Description | Age of the patient. |
| Primary Table: | Visit |
| Availability to Users: | CORE |
| Type of Data: | Continuous |
| Format: | Integer |
| Length: | 3 |
| CHIA derived: | Yes |
| Description: | Age of the patient as calculated by CHIA. Rounded up to the nearest integer. Patients younger than 1 year or older than 89 years have their ages grouped. Discretion should be used whenever a questionable age assignment is noted. Researchers are advised to consider other data elements in their analysis of this field. |

AmbulanceRunSheet

| | |
|-------------------------------|---|
| Short Description | EMS ambulance run sheet number. |
| Primary Table: | Visit |
| Availability to Users: | GOV |
| Type of Data: | Identifier |
| Format: | Varchar |
| Description: | Reported to ED facility. May be present if patient arrived by the ground or air ambulance. The unique identifier automatically assigned by the ambulance agency for each Patient Care Report. |

Charges

| | |
|-------------------------------|--------------------------------------|
| Short Description | Facility reported costs for a visit. |
| Primary Table: | Visit |
| Availability to Users: | CORE |
| Type of Data: | Currency |
| Format: | Integer |

Description: The grand total of charges associated with the patient’s emergency department visit. The total charge amount is rounded to the nearest dollar. A charge of \$0 is not permitted unless the patient has a special Departure Status reported by facility.

Summary statistics: Table 7

City

Short Description Municipality in which the emergency department is located.

Primary Table: Organization

Availability to Users: CORE

Type of Data: Categorical

Format: Varchar

Description: Name of the municipality in which the emergency department is located.

ConditionPresent

Short Description Flags whether the diagnosis was present on admission.

Primary Table: Diagnosis

Availability to users: CORE

Type of Data: Categorical

Length: 2

Format: Varchar

Description: Indicates the onset of a diagnosis preceded or followed by admission. There is a present on admission (POA) indicator for every diagnosis and external cause-code.

Reference table: Table 3

DateInactive

Short Description Date in which facility was inactive as an ED.

Primary Table: Organization

Availability to users: CORE

Type of Data: Date

Description: Date in which facility was inactive as an ED.

DaysBetweenVisits

Short Description CHIA derived field to allow for easy calculation of number of days between ED visits.

Primary Table: Visit

Availability to users: CORE

Type of Data: Continuous

Format: Integer

Length: 4
Description: This CHIA calculated field indicates the number of days between each ED Visit for applicable patients. That is, a match with the UHIN only is used to make a determination that a patient has a revisit. The calculation is Date of Visit 2 - Date of Visit 1.
Summary statistics: Table 7

DepartureStatus

Short Description: Standardized departure status
Primary Table: Visit
Availability to users: CORE
Type of Data: Categorical
Format: Varchar
Length: 1
Description: CHIA defined departure status as reported by ED facility. This field identifies the disposition and destination of the patient after departure from the ED.
Summary Statistics: Table 8
Reference Table:

| CODE | DESCRIPTION |
|------|---|
| 1 | Routine (i.e. to home or usual place of residence) |
| 3 | Transferred to Other Facility |
| 4 | Against Medical Advice (AMA) |
| 6 | Eloped |
| 8 | Within Hospital Clinic Referral |
| 9 | Dead on Arrival (DOA) (with or without resuscitative efforts in the ED) |
| 0 | Died during ED Visit |
| P | Patient met personal physician in the ED (not seen by staff) |

DiagnosisCode

Short Description: ICD-10-CM code for each diagnosis reported by the facility.
Primary Table: Diagnosis
Availability to users: CORE
Type of Data: Categorical
Format: Varchar

Length: 7
Description: ICD-10-CM Associated Diagnosis. Excludes the decimal point. May be an External Cause Code or an Associated or Supplemental External Cause Code IF the Principal External Cause Code is present. Associated External Cause Codes may be: ICD-10-CM (V00-Y89) and Supplemental Codes: (Y90-Y99) (place of injury, activity, status).
Reference table: Standard ICD-9-CM or ICD-10-CM Diagnosis Codes

DischargeDate

Short Description Date patient left emergency department.
Primary Table: Visit
Availability to users: LDS
Type of Data: Date
Format: YYYYMMDD
Length: 8
Description: Calendar date of discharge from the ED.

DischargeDay

Short Description Day of the month on which the patient was discharged from ED.
Primary Table: Visit
Availability to users: CORE
Type of Data: Date
Format: DD
Length: 3
Description: Calendar day of discharge from ED. Only values between 1 and 31 are valid.

DischargeDateMM

Short Description Month in which patient was discharged from ED.
Primary Table: Visit
Availability to users: LDS
Type of Data: Date
Format: MM
Length: 6
Description: Month of discharge from ED. Only two-digit values are valid.

DischargeTime

Short Description Time stamp indicating when the patient departed the ED.
Primary Table: Visit

Availability to users: GOV
Type of Data: TIME
Format: HH:MM
Description: Time at which the patient was discharged from the ED is hours and minutes in military time. Time ranges from 0000 to 2359.

DNRStatus

Short Description: Patient had physician order not to resuscitate or patient receiving palliative care only.
Primary Table: Visit
Availability to users: LDS
Type of Data: Ordinal
Format: Integer
Description: A status indicating that the patient had a physician order not to resuscitate or the patient had a status of receiving palliative care only.

Reference table:

| CODE | DESCRIPTION |
|------|--|
| 1 | DNR order written |
| 2 | Comfort measures only |
| 3 | No DNR order or comfort measures ordered |

EDVisitID

Short Description: Facility specific unique visit key.
Primary Table: Visit
Linking tables: Service
Availability to users: CORE
Type of Data: Identifier
Description: Facility specific unique identifier for each visit record. Used to link between tables. Users should use this field, along with the facility identifiers to associate visit data. The total volume of ED visit records will always equal the total volume of unique ED visit IDs.

EmergencySeverity

Short Description: Facility calculated measure of severity.
Primary Table: Visit
Availability to users: CORE
Type of Data: Categorical

Description: Patient’s score on the Emergency Severity Index, as described in Gilboy N, Tanabe T, Travers D, Rosenau AM. Emergency Severity Index (ESI): A Triage Tool for Emergency Department Care, Version 4. Implementation Handbook 2012 Edition. AHRQ Publication No. 12-0014. Rockville, MD. Agency for Healthcare Research and Quality. November 2011 “. It employs a five-level scale. It may be reported on Record Type 20 as an alternative to, or in addition to, the Type of Visit. Regardless of whether the ESI or the Type of Visit is reported; it should reflect the initial assessment of the patient, and not a subsequent revision of it due to information gathered during the course of the emergency department visit.

Summary Statistics: Table 9

EMSRegion

Short Description Emergency response region (I-V) where facility is located.
Primary Table: Organization
Availability to users: CORE
Type of Data: Categorical
Description: Massachusetts emergency region code. For additional information on EMS Regions, see: <https://www.mass.gov/service-details/ems-regions-in-massachusetts>

ErrorCategory

Short Description Indicates what the error was on a visit record.
Primary Table: ErrorLog
Availability to users: CORE
Type of Data: Categorical
CHIA derived: Yes
Description: CHIA flag that indicates what the error was on a visit record. Used for processing.

ErrorDescription

Short Description Standardized Description of the reported error.
Primary Table: ErrorLog
Availability to users: CORE
Type of Data: Categorical
CHIA derived: Yes
Description: CHIA flag for a reported error in data. Used for processing.

Ethnicity 1, Ethnicity 2

Short Description: Standardized, facility reported ethnicity.
Primary Table: Visit
Availability to users: LDS
Type of Data: Categorical
Length: 6
Description: Primary (Ethnicity 1) or Secondary (Ethnicity 2) ethnicity as reported by the provider. CHIA's Provider community utilizes the full list of standard ethnicity codes, per the Center for Disease Control [http://www.cdc.gov/nchs/data/dvs/Race_Ethnicity_CodeSet.pdf] and the specific codes listed below.

Reference table:

| CODE | DESCRIPTION |
|--------|-----------------------|
| AMERCN | American |
| BRAZIL | Brazilian |
| CVERDN | Cape Verdean |
| CARIBI | Caribbean Island |
| PORTUG | Portuguese |
| RUSSIA | Russian |
| EASTEU | Eastern European |
| OTHER | Other Ethnicity |
| UNKNOW | Unknown/Not specified |

HispanicIndicator

Short Description: Indicates whether patient was Hispanic.
Primary Table: Visit
Availability to users: CORE
Type of Data: Categorical
Length: 1
Description: A flag for patients of Hispanic/Latino/Spanish culture or origin regardless of race.
Summary Statistics: Table 10

Reference table:

| CODE | DESCRIPTION |
|------|-------------------------------------|
| Y | Patient is Hispanic/Latino/Spanish. |

| | |
|---|---|
| N | Patient is not Hispanic/Latino/Spanish. |
|---|---|

HomelessIndicator

Short Description: Indicates whether the patient was homeless.
Primary Table: Visit
Availability to users: CORE
Type of Data: Categorical
Length: 1
Description: This flag indicates that the patient was homeless at the time of visit.
Summary Statistics: Table 11
Reference table:

| CODE | DESCRIPTION |
|------|--------------------------------------|
| Y | Patient is known to be homeless. |
| N | Patient is not known to be homeless. |

HospitalBillNumber

Short Description: Unique patient billing record.
Primary Table: Visit
Availability to users: GOV-SPEC
Type of Data: Identifier
Format: VARCHAR
Length: 17
Description: Facility unique number associated with all billing for the visit.

ICD Indicator

Short Description: ICD version
Primary Table: Visit
Availability to users: CORE
Type of Data: Categorical
Description: Indicates if the diagnoses, external cause codes, and procedure codes are ICD-10-CM/PCS or ICD-9-CM
Reference table: Table 12

IdOrgFiler

| | |
|-------------------------------|--|
| Short Description | ID number of the facility that submitted ED claims. |
| Primary Table: | Visit |
| Linking tables: | SubmissionLog ErrorLog |
| Availability to users: | CORE |
| Type of Data: | Identifier |
| Description: | The Organization ID for the facility that submitted the ED visit data to CHIA. |
| Reference table: | Table 1 |

IdOrgHosp

| | |
|-------------------------------|--|
| Short Description | Facility identifier. |
| Primary Table: | Visit |
| Availability to users: | CORE |
| Type of Data: | Identifier |
| Length: | 8 |
| Description: | The Organization ID for the main facility affiliation. |
| Reference table: | Table 1 |

IdOrgSite

| | |
|-------------------------------|--|
| Short Description | Facility identifier. |
| Primary Table: | Visit |
| Availability to users: | CORE |
| Type of Data: | Identifier |
| Length: | 8 |
| Description: | The Organization ID for the site where the patient received ED care. |
| Reference table: | Table 1 |

IdOrgTransfer

| | |
|-------------------------------|---|
| Short Description | Indicates where patient was transferred from. |
| Primary Table: | Visit |
| Availability to users: | CORE |
| Type of Data: | Identifier |
| Length: | 10 |
| Description: | Organization ID for the facility from which a patient is transferred. If the patient is transferred from outside of Massachusetts, the IdOrgTransfer will be 9999999. |
| Reference table: | Table 1 |

FieldName

| | |
|-------------------------------|--|
| Short Description | Name of the data element that caused the error. |
| Primary Table: | ErrorLog |
| Availability to users: | CORE |
| Type of Data: | Categorical |
| Description: | Name of the data element that caused the error. Used for processing. |

GroupName

| | |
|-------------------------------|--|
| Short Description | Name of the system running the ED facility. |
| Primary Table: | Organization |
| Availability to users: | CORE |
| Type of Data: | Open Text |
| Description: | System that owns or runs the emergency department. |

InpatientVisits

| | |
|-------------------------------|--|
| Short Description | A count of ED visits that resulted in inpatient visit per each submission (facility-Quarter). |
| Primary Table: | ServiceSummary |
| Availability to users: | CORE |
| Type of Data: | Continuous |
| Format: | Integer |
| Description: | A count of ED visits that resulted in inpatient visit per each submission (facility-Quarter). Does not correspond to any visits in the database. |

LegCHIAMothersUHIN

| | |
|-------------------------------|--|
| Short Description | Patient's mother's unique id. |
| Primary Table: | Visit |
| Availability to users: | LDS |
| Type of Data: | Identifier |
| Format: | Varchar |
| Length: | 9 |
| CHIA derived: | Yes |
| Description: | CHIA-generated unique identifier of a newborn's mother. For newborns or for infants less than 1 year old, CHIA derives a unique ID for the patient's mother. This unique ID allows a newborn visit to be associated with a Mother's visit. Linkable across records and fiscal years. Each patient is given by CHIA a Unique Health Information Number (UHIN), which is a surrogate key that can link patients over time and across facilities. The data element is blank, a single dash (-) appears in the UHIN field. It is |

valid for facilities to report that the unique patient identifier is unknown. In these cases, the UHIN appears as '000000001'. The utility of the UHIN field is dependent on the reporting data. For a small number of facilities, little or no UHIN data exists, as these institutions failed to report patients' uniquely identified information. Other facilities reported the same data repeatedly, resulting in numerous admissions for one UHIN. In other cases, the demographic information (age, sex, etc.) was not consistent when a match did exist with the UHIN. Some explanations for this include assignment of a mother's unique identifiers to her infant or assignment of a spouse's unique identifiers to a patient. Invalid data uses the code UHIN="4".

LegCHIAPatientUHIN

| | |
|-------------------------------|--|
| Short Description | Patient's unique id. |
| Primary Table: | Visit |
| Availability to users: | LDS |
| Type of Data: | Identifier |
| Format: | Varchar |
| Length: | 9 |
| CHIA derived: | No |
| Description: | CHIA generated unique identifier of the patient. Linkable across records and fiscal years. Each patient is given by CHIA a Unique Health Information Number (UHIN), which is a surrogate key that can link patients over time and across facilities. The data element is blank, a single dash (-) appears in the UHIN field. It is valid for facilities to report that the unique patient identifier is unknown. In these cases, the UHIN appears as '000000001'. The utility of the UHIN field is dependent on the reporting data. For a small number of facilities, little or no UHIN data exists, as these institutions failed to report patients' uniquely identified information. Other facilities reported the same data repeatedly, resulting in numerous admissions for one UHIN. In other cases, the demographic information (age, sex, etc.) was not consistent when a match did exist with the UHIN. Some explanations for this include assignment of a mother's unique identifiers to her infant or assignment of a spouse's unique identifiers to a patient. Invalid data uses the code UHIN="4". |

LengthOfStayHours

| | |
|-------------------------------|--------------------------------|
| Short Description | Count of days in the hospital. |
| Primary Table: | Visit |
| Availability to users: | CORE |
| Type of Data: | Continuous |
| Format: | Integer |
| Length: | 4 |
| CHIA derived: | Yes |

Description: Count of hours between the admitting and discharge time for an ED visit.
Summary statistics: Table 7

ManagedCareCode

Short Description Payer code indicating HMO.
Primary Table: PayerCategory
Availability to users: CORE
Type of Data: Categorical
CHIA derived: Yes
Description: Subset of payer codes that indicate a managed care plan paid for the visit.

MedicalRecordNumber

Short Description Visit identifier assigned by the facility
Primary Table: Visit
Availability to users: GOV
Type of Data: Identifier
Format: Varchar
Length: 10
Description: The unique number assigned to each patient within the hospital that distinguishes the patient and the patient’s hospital record(s) from all others in that institution.

MedicaidMemberID

Short Description Patient's MassHealth unique ID.
Primary Table: Visit
Availability to users: GOV
Type of Data: Identifier
Description: Unique MassHealth Identifier of a patient.

NewBornAgeWeeks

Short Description Age of children younger than age 1. Valid values are 1-52.
Primary Table: Visit
Availability to users: CORE
Type of Data: Continuous
Format: Integer
Length: Yes

Description: Age in weeks for children younger than 53 weeks of age who are admitted to the ED. Weeks are calculated from the Admitting Date - the DOB, and then rounded to the nearest week. Only values between 0 and 52 are valid. All other values are invalid.

Summary Statistics: Table 7

NumberOfEDVisitsFailed

Short Description CHIA derived error field

Primary Table: DataSubmissionLog

Linking tables: ErrorLog

Availability to users: CORE

Type of Data: Continuous

Description: Count of ED records that failed CHIA intake.

NumberOfEDVisitsPassed

Short Description CHIA derived error field

Primary Table: DataSubmissionLog

Linking tables: ErrorLog

Availability to users: CORE

Type of Data: Continuous

CHIA derived: Yes

Description: Count of ED records that passed CHIA intake.

NumberOfEDVisits

Short Description Count of the number of ED visits for that facility in that quarter, including any inpatient or observation visits not captured in this database.

Primary Table: DataSubmissionLog

Linking tables: ErrorLog

Availability to users: CORE

Type of Data: Continuous

Description: Total number of registered ED Visits occurring during the reporting period that resulted in inpatient admission (whether preceded by observation stay or not).

NumberOfErrors

Short Description Count of errors in submission.

Primary Table: ErrorLog

Availability to users: CORE

Type of Data: Continuous

Description: Count of errors in submission.

ObservationBeds

Short Description: Count of observation beds for the ED facility.
Primary Table: ServiceSummary
Availability to users: CORE
Type of Data: Continuous
Format: Integer
Description: Beds located in a distinct area within or adjacent to the emergency department, which are intended for use by observation patients. Facilities include only beds that are set up and equipped on a permanent basis to treat patients. They should not include temporary use of stretchers, gurneys, etc.

OrgId

Short Description: Unique identifier for ED facility. Linkage across tables and fiscal years.
Primary Table: Organization
Linking tables: Visit
Availability to users: CORE
Type of Data: Identifier
Format: Integer
Description: ED facility specific identifier.
Reference table: Table 1

OrganizationGroupID

Short Description: System ID
Primary Table: Organization
Availability to users: CORE
Type of Data: Identifier
Description: Code indicating the system that runs the emergency room.
Reference table: Table 1

OrganizationName

Short Description: Name of ED facility.
Primary Table: Organization
Linking tables: SubmissionLog
 ErrorLog
Availability to users: CORE

| | |
|-------------------------|----------------------------|
| Type of Data: | Open Text |
| Format: | Varchar |
| Length: | 30 |
| Description: | ED facility specific name. |
| Reference table: | Table 1 |

OrganizationNumber

| | |
|-------------------------------|---|
| Short Description | ORGID of the facility that owns the emergency room. |
| Primary Table: | Organization |
| Availability to users: | CORE |
| Type of Data: | Identifier |
| Description: | ORGID of the facility that owns the emergency room. |
| Reference table: | Table 1 |

OrganizationTypeID

| | |
|-------------------------------|--------------------|
| Short Description | Analogue to ORGID. |
| Primary Table: | Organization |
| Availability to users: | CORE |
| Type of Data: | Categorical |
| Description: | See ORGID. |
| Reference table: | Table 1 |

OtherCareGiver

| | |
|-------------------------------|--|
| Short Description | Indicates if the patient had a caregiver. |
| Primary Table: | Visit |
| Availability to users: | CORE |
| Type of Data: | Categorical |
| Length: | 1 |
| Description: | This data element indicates the type of primary caregiver responsible for the patient's care other than the attending physician, operating room physician, or nurse midwife as specified in the Regulation. Other caregiver codes include resident, intern, nurse practitioner, and physician assistant. |
| Summary Statistics | Table 13 |
| Reference table: | |

| CODE | DESCRIPTION |
|------|---------------------|
| 1 | Resident |
| 2 | Intern |
| 3 | Nurse Practitioner |
| 4 | Not Used |
| 5 | Physician Assistant |

OtherEthnicity

| | |
|-------------------------------|---|
| Short Description | Non-standard patient ethnicity designations. |
| Primary Table: | Visit |
| Availability to users: | GOV |
| Type of Data: | Open Text |
| Format: | Varchar |
| Length: | 20 |
| Description: | Patient's ethnicity as entered by the facility. Other ethnicity is an open text field for reporting additional ethnicities when ethnicity 1 or ethnicity 2 equals "R9", or "Other ethnicity". |

OtherPhysicianNumber

| | |
|-------------------------------|---|
| Short Description | Unique identifier of a non-attending physician. |
| Primary Table: | Visit |
| Availability to users: | LDS |
| Type of Data: | Identifier |
| Description: | Physician's state license number (BORIM #) for physician other than the ED physician who provided services related to this visit. Reported if the physician's involvement in the patient's ED Visit is captured in the facility's electronic information systems. |

OtherRace

| | |
|-------------------------------|--|
| Short Description | Non-standard patient race designations. |
| Primary Table: | Visit |
| Availability to users: | GOV |
| Type of Data: | Open Text |
| Format: | Varchar |
| Length: | 15 |
| Description: | Patient's Race as entered by the facility. Other Race is an open text field for reporting additional races when Race 1 or Race 2 equals "R9", or "Other Race". |

OutpatientObservationVisits

| | |
|-------------------------------|---|
| Short Description | Count of the number of Observation visits that began in the ER. |
| Primary Table: | ServiceSummary |
| Availability to users: | CORE |
| Type of Data: | Continuous |
| Description: | Indicates that the patient was admitted from the facility's outpatient observation department or had prior outpatient utilization. Does not correspond to any other data in the database. |

Passed

| | |
|-------------------------------|--|
| Short Description | CHIA processing field |
| Primary Table: | SubmissionLog |
| Availability to users: | CORE |
| Type of Data: | Categorical |
| Description: | CHIA indicator of quarterly submission status. |

PatientBirthDate

| | |
|-------------------------------|----------------------------------|
| Short Description | Patient Date of Birth |
| Primary Table: | Discharge |
| Availability to users: | GOV |
| Type of Data: | Date |
| Format: | YYYYMMDD |
| Length: | 8 |
| Description: | Calendar date of patient's birth |

PayerCategory

| | |
|-------------------------------|---|
| Short Description | Standardized association of a payer with a type of insurance. |
| Primary Table: | PayerCategory |
| Availability to users: | CORE |
| Type of Data: | Categorical |
| Description: | A standardized payer code. MA payers are identified in advance of the payment cycle. This field captures the specific differences between those payers. The payer table is extensive. |
| Reference table: | Table 5 |

PayerMCareMCaidPrivCode

| | |
|-------------------------------|--|
| Short Description | Payer code indicating Medicare/MassHealth. |
| Primary Table: | PayerCategory |
| Availability to users: | CORE |
| Type of Data: | Categorical |
| CHIA derived: | Yes |
| | Payer Type |
| Description: | Subset of payer codes that indicate Medicare or MassHealth paid for the visit. |
| Reference table: | Table 5 |

PayerSourceCode

| | |
|-------------------------------|--|
| Short Description | Standardized payer source code. |
| Primary Table: | PayerCategory |
| Availability to users: | CORE |
| Type of Data: | Categorical |
| Description: | A standardized source of payment code (different than payer code). Most MA payers are identified in advance of the payment cycle. This field captures the specific differences between those payers. The payer table is extensive. |
| Reference table: | Table 5 |

PayerSourceDefinition

| | |
|-------------------------------|--|
| Short Description | Description of the standardized payer source codes. |
| Primary Table: | PayerCategory |
| Availability to users: | CORE |
| Type of Data: | Categorical |
| Description: | A description for use with standardized payer codes. Most MA payers are identified in advance of the payment cycle. This field captures the specific differences between those payers. The payer table is extensive. |
| Reference table: | Table 5 |

PayerType

| | |
|-------------------------------|--|
| Short Description | Categorical. Type of Payer. |
| Primary Table: | PayerCategory |
| Availability to users: | CORE |
| Type of Data: | Categorical |
| Description: | Indicates the type of organization or individual who is payer. |
| Reference table: | Table 5 |

PermanentPatientCityLDS

| | |
|-------------------------------|--|
| Short Description | Permanent city of residence for the patient. |
| Primary Table: | Visit |
| Availability to users: | LDS |
| Type of Data: | Open Text |
| Format: | Varchar |
| Length: | 25 |
| Description: | Primary city of residency for patient. |

PermanentPatientCountryLDS

| | |
|-------------------------------|--|
| Short Description | Permanent country of residence for the patient. |
| Primary Table: | Visit |
| Availability to users: | CORE |
| Type of Data: | Categorical |
| Format: | Varchar |
| Length: | 2 |
| Description: | Permanent country of residency for patient reported using International Standards Organization (ISO - 3166) 2-digit country code |

PermanentPatientStateLDS

| | |
|-------------------------------|--|
| Short Description | Permanent state of residence for the patient. |
| Primary Table: | Visit |
| Availability to users: | CORE |
| Type of Data: | Categorical |
| Length: | 2 |
| Description: | Permanent state of residency for patient reported using USPS 2-digit state abbreviation. |
| Reference table: | Table 6 |

PermanentPatientZIP3CodeLDS

| | |
|-------------------------------|---|
| Short Description | 3-digit ZIP code of the patient's permanent residence. |
| Primary Table: | Visit |
| Availability to users: | CORE |
| Type of Data: | ZIP code |
| Format: | Varchar |
| Length: | 3 |
| Description: | First three digits of patient's permanent ZIP code. ZIP codes are not standardized and this field is as reported from a nine-digit ZIP code. For LDS users only, if the |

patient state is not in Massachusetts or a state bordering Massachusetts (Connecticut, Maine, New Hampshire, New York, Vermont or Rhode Island) ZIP codes are set to zeros (0s) and the state is removed.

PermanentPatientZIP5CodeLDS

| | |
|-------------------------------|--|
| Short Description | 5-digit ZIP code of the patient's permanent residence. |
| Primary Table: | Visit |
| Availability to users: | LDS |
| Type of Data: | ZIP code |
| Format: | Varchar |
| Length: | 5 |
| Description: | First five digits of patient's permanent zip code. ZIP codes are not standardized and this field is as reported from a nine-digit ZIP code. For LDS users only, if the patient state is not in Massachusetts or a state bordering Massachusetts (Connecticut, Maine, New Hampshire, New York, Vermont or Rhode Island) ZIP codes are set to zeros (0s) and the state is removed. |

PhysicianNumber

| | |
|-------------------------------|--|
| Short Description | Uniquely identifies the attending physician. |
| Primary Table: | Visit |
| Availability to users: | LDS |
| Type of Data: | Identifier |
| Description: | Physician's state license number (BORIM #) for the ED Physician who provided services related to this visit. Report if the physician's involvement in the patient's ED Visit is captured in the facility's electronic information systems. |

PrimaryPayerType

| | |
|-------------------------------|--|
| Short Description | Primary payer type for the visit. |
| Primary Table: | Visit |
| Availability to users: | CORE |
| Type of Data: | Categorical |
| Description: | Patient's expected primary payer type for the ED Visit. Report the single character text code indicating the type of payer who has primary responsibility for the payment of the services related to the ED visit. |
| Reference table: | Table 4 |

PrimarySourceofPayment

| | |
|-------------------------------|--|
| Short Description | Primary payer for the visit. |
| Primary Table: | Visit |
| Availability to users: | CORE |
| Type of Data: | Categorical |
| Description: | Primary payer for the ED Visit. Please note that for Source of Payment, the values are in "text" format and may have duplicate numbers due to spaces in the field. |
| Reference table: | Table 5 |

PrincipalConditionPresent

| | |
|-------------------------------|--|
| Short Description | Flag indicating that principal condition was present on admission. |
| Primary Table: | Visit |
| Availability to users: | CORE |
| Type of Data: | Categorical |
| Length: | 1 |
| Description: | Indicates that principal condition was present on admission. |
| Reference table: | Table 3 |

PrincipalDiagnosisCode

| | |
|-------------------------------|---|
| Short Description | ED Determined ICD-10-CM code for the Condition that led to the admission to the ED. |
| Primary Table: | Visit |
| Availability to users: | CORE |
| Type of Data: | Categorical |
| Length: | 7 |
| Description: | The ICD diagnosis code corresponding to the condition established after study to be chiefly responsible for the admission of the patient for hospital care. |
| Reference table: | Standard ICD-10-CM Diagnosis Codes |

PrincipalECode

| | |
|-------------------------------|---|
| Short Description | ICD-10-CM V00-Y99 code for the external cause that led to the admission to the ED. |
| Primary Table: | Visit |
| Availability to users: | CORE |
| Type of Data: | Categorical |
| Description: | This data element describes the principal external cause of injuries, poisonings, and adverse effects using ICD-10-CM codes. ED determined. In addition to the dedicated external cause Code field, facilities record additional external cause Codes in the associated diagnosis fields for conditions having multiple causes. |
| Reference table: | Standard ICD-10-CM V00-Y99 Codes |

PrincipalECodeConditionPresent

| | |
|-------------------------------|---|
| Short Description | Present on admission indicator |
| Primary Table: | Visit |
| Availability to users: | CORE |
| Type of Data: | Categorical |
| Description: | Flag indicating that principal e-code condition was present on admission. Determined by the emergency department. |
| Reference table: | Table 3 |

PrincipalIndicator

| | |
|-------------------------------|---|
| Short Description | Indicates principal condition |
| Primary Table: | Diagnosis |
| Availability to users: | CORE |
| Type of Data: | Categorical |
| Description: | Indicates if the diagnosis code was principal or secondary. Each diagnosis record has this field. |

ProcedureCode

| | |
|-------------------------------|---|
| Short Description | Code for each significant procedure reported by the facility. |
| Primary Table: | Procedure |
| Availability to users: | CORE |
| Type of Data: | Categorical |
| Length: | 7 |
| Description: | The ICD-10-PCS or Current Procedural Terminology (CPT) code corresponding to procedures which carry an operative or anesthetic risk or require highly trained personnel, special equipment or facilities. Should be used in conjunction with Procedure Coding Type. |
| Reference table: | ICD-10-PCS Procedure Codes or CPT codes |

ProcedureCodingType

| | |
|-------------------------------|--|
| Short Description | Indicates the type of procedure code |
| Primary Table: | Procedure |
| Availability to users: | CORE |
| Type of Data: | Categorical |
| Description: | Indicates if the code is an ICD-10-PCS code, Current Procedural Terminology (CPT) code, or Healthcare Common Procedure Coding System (HCPCS) code. |

Quarter

| | |
|-------------------------------|---|
| Short Description | Quarter of submission. |
| Primary Table: | SubmissionLog |
| Availability to users: | CORE |
| Type of Data: | Date |
| Format: | QQ |
| Length: | 8 |
| Description: | Quarter in which the visit was submitted to CHIA. |

Race1, Race2

| | |
|-------------------------------|---------------------------------------|
| Short Description | Standardized, facility reported race. |
| Primary Table: | Visit |
| Availability to users: | LDS |
| Type of Data: | Categorical |
| Length: | 6 |
| CHIA derived: | No |
| Reference table: | |

| CODE | DESCRIPTION |
|--------|---|
| R1 | American Indian/Alaska Native |
| R2 | Asian |
| R3 | Black/African American |
| R4 | Native Hawaiian or other Pacific Islander |
| R5 | White |
| R9 | Other Race |
| Unknow | Unknown |

RecordType20ID

| | |
|-------------------------------|--------------------------------------|
| Short Description | Unique key to link from Visit table. |
| Primary Table: | Visit |
| Availability to users: | CORE |
| Type of Data: | Identifier |
| Format: | Varchar |
| Length: | 1 |
| CHIA derived: | Yes |

Description: Indicator for Record Type '20'. Required for every ED Visit. Only one allowed per ED Visit. ED Visit specific record identifier used to link data about a specific visit across CHIA data tables. Users should use this identifier with facility IDs and Discharge ids to capture a unique record.

RegistrationDate

Short Description Date of admission to the emergency department
Primary Table: Visit
Availability to users: LDS
Type of Data: Date
Format: YYYYMMDD
Length: 8
Description: Calendar date of admission to the emergency department.

RegistrationDay

Short Description Day patient was admitted to ED
Primary Table: Visit
Availability to users: LDS
Type of Data: Date
Format: DD
Description: Two digit date of admission to the emergency department. Only values between 1 and 31 are valid.

RegistrationMonthMM

Short Description Month of admission to ED
Primary Table: Visit
Availability to users: LDS
Type of Data: MM
Description: Month in which the patient was admitted to the emergency department. Only values between 1 and 12 are valid.

RegistrationTime

Short Description Time stamp indicating when the patient was admitted to the ED
Primary Table: Visit
Availability to users: GOV
Type of Data: Time
Format: HH:MM:

Length: 6
Description: Time at which the patient was registered in the ED is hours and minutes in military time. Time ranges from 0000 to 2359.

RegistrationYear

Short Description Year of admission to the ED
Primary Table: Visit
Availability to users: CORE
Type of Data: Date
Format: YYYY
Length: 4
Description: Year patient was admitted to ED. As data is in Fiscal years, valid values may be 2019 and 2020.

SecondaryPayerType

Short Description Secondary payer type for the visit.
Primary Table: Visit
Availability to users: CORE
Type of Data: Categorical
Description: Patient's expected secondary payer type for the ED Visit. Report the single character text code indicating the type of payer who has secondary responsibility for the payment of the services related to the ED visit.
Reference table: Table 4

SecondarySourceOfPayment

Short Description Secondary payer for the visit.
Primary Table: Visit
Availability to users: CORE
Type of Data: Categorical
Length: 4
Description: Secondary payer for this visit. Please note that the values are in "text" format and may have duplicate numbers due to spaces.
Reference table: Table 5

SecondarySourceOfVisit

Short Description Secondary cause of the visit to the emergency room.
Primary Table: Visit

| | |
|-------------------------------|---|
| Availability to users: | CORE |
| Type of Data: | Categorical |
| Description: | The two sources of visit codes (Source of Visit and Secondary Source of Visit) indicate the source originating, referring, or transferring the patient to the ED. |

Sequence

| | |
|-------------------------------|--|
| Short Description | Order of visits during a fiscal year |
| Primary Table: | Visit |
| Linking tables: | Service |
| Availability to users: | CORE |
| Type of Data: | Continuous |
| CHIA derived: | Yes |
| Description: | This calculated field indicates the chronological order of ED visits for patients with multiple ED visits. A match with the UHIN only, is used to make the determination that a patient has had multiple visits. The Sequence Number uses the following data conventions: (1) The sequence number is calculated by sorting the file by UHIN and visit date (in ascending order). (2) The sequence number is then calculated by incrementing a counter for each UHIN's set of visits. A sequence number of "1" indicates the first admission for the UHIN in that fiscal year. (3) If a UHIN has two visits on the same day, the visit date is used as the secondary sort key. (4) If the UHIN is undefined (not reported, unknown or invalid), the sequence number is set to zero. |

ServiceID

| | |
|-------------------------------|-------------------------------------|
| Short Description | CHIA identifier for a revenue code. |
| Primary Table: | Service |
| Availability to users: | CORE |
| Type of Data: | Identifier |
| Description: | CHIA identifier for a revenue code. |

ServiceLineItem

| | |
|-------------------------------|---|
| Short Description | CHIA description of service field. |
| Primary Table: | Service |
| Availability to users: | CORE |
| Type of Data: | Ordinal |
| Description: | Service Line Items are the Current Procedural Terminology (CPT) or Healthcare Common Procedure Coding System (HCPCS) codes used to bill for specific items and services provided by the emergency department during the visit. In addition, the code DRUGS is used to report provision of any drugs for which there are no specific |

HCPCS codes available. Likewise, SPPLY is used to report any supplies for which there are no specific HCPCS codes available. Since units of service are not collected in the database, it is possible that the item or service which a reported service line item code represents was actually provided to the patient more than once during the visit.

ServiceSiteSummaryKey

Short Description: CHIA identifier.
Primary Table: ServiceSummary
Availability to users: CORE
Type of Data: Identifier

SexLDS

Short Description: Indicates gender
Primary Table: Visit
Availability to users: CORE
Type of Data: Categorical
Length: 1
CHIA derived: No
Description: Gender flag as assigned by emergency department.
Summary statistics: Table 14
Reference table:

| CODE | DESCRIPTION |
|------|-------------|
| M | Male |
| F | Female |
| U | Unknown |

SourceOfVisit

Short Description: How a patient reached the ED.
Primary Table: Visit
Availability to users: CORE
Type of Data: Categorical
Description: The two source of visit codes (Source of Visit and Secondary Source of Visit) that indicate the source originating, referring or transferring the patient to the ED. Reporting patterns for the Source of Visit data element may vary widely and, as a result, may not be reliable.

Summary statistics: Table 15
Reference table: Table 2

SubmissionActive

Short Description CHIA processing field
Primary Table: ErrorLog
Availability to users: CORE
Type of Data: Categorical

SubmissionControlID

Short Description Unique per facility-quarter-submission. Key to link from the Visit table.
Primary Table: Visit
Availability to users: CORE
Type of Data: Identifier
Format: Varchar
Length: 4
CHIA derived: No
Description: Unique ID for a facility's submission of data to CHIA. Usually one Submission Control ID is associated with a facility's quarterly submission.

SubmissionPassed

Short Description CHIA flag.
Primary Table: ErrorLog
Availability to users: CORE
Type of Data: Categorical
Description: Indicates that visit was submitted to CHIA and passed.

SubmissionPassedFlag

Short Description CHIA derived field
Primary Table: Visit
Availability to users: CORE
Type of Data: Categorical
Length: 4

SubmissionQuarter

Short Description Indicates the quarter (1-4) in which the record was submitted to CHIA.
Primary Table: ErrorLog
Availability to users: CORE
Type of Data: Date
Description: Quarter in which the visit was submitted to CHIA.

SubmissionYear

Short Description Year in which the visit was submitted to CHIA.
Primary Table: ErrorLog
Availability to users: CORE
Type of Data: Date
Description: Indicates the year (2019-2020) in which the record was submitted to CHIA.

TeachingStatus

Short Description Indicates if the ED facility was located in a teaching facility.
Primary Table: Organization
Availability to users: CORE
Type of Data: Categorical
Description: Indicates whether the ED is part of an academic facility or engaged in health professional education.

TemporaryPatientCityLDS

Short Description Current municipality of residence for a patient, if different from permanent residence.
Primary Table: Visit
Availability to users: LDS
Type of Data: Open Text
Format: VARCHAR
Length: 25
Description: MA City in which the patient temporarily resides.

TemporaryPatientStateLDS

Short Description Current state of residence for a patient, if different from permanent residence.
Primary Table: Visit
Availability to users: CORE
Type of Data: Categorical
Length: 2
Description: Indicates "MA" if the patient temporarily resides in Massachusetts.

Reference table: Table 6

TemporaryPatientZIP3CodeLDS

Short Description Current 3-digit ZIP code of patient residence, if different from permanent residence.
Primary Table: Visit
Availability to users: CORE
Type of Data: ZIP code
Format: Varchar
Length: 3
Description: First three digits of patient's temporary, Massachusetts ZIP code. ZIP codes are not standardized and this field is as reported from a nine-digit ZIP code. The Limited Data Set supports selection of 3-character ZIP Code or 5-character ZIP Code for approval by CHIA. Government users may be able to request a 9-character ZIP Code. For LDS users only, if the patient state is not in Massachusetts or a state bordering Massachusetts (Connecticut, Maine, New Hampshire, New York, or Rhode Island) ZIP codes are set to zeros (0s) and the state is removed.

TemporaryPatientZIP5CodeLDS

Short Description Current 5-digit ZIP code of patient residence, if different from permanent residence.
Primary Table: Visit
Availability to users: LDS
Type of Data: ZIP code
Format: Varchar
Length: 5
Description: First five digits of patient's temporary, Massachusetts ZIP code. ZIP codes are not standardized and this field is as reported from a nine-digit ZIP code. The Limited Data Set supports selection of 3-character ZIP Code or 5-character ZIP Code for approval by CHIA. Government users may be able to request a 9-character Zip Code. For LDS users only, if the patient state is not in Massachusetts or a state bordering Massachusetts (Connecticut, Maine, New Hampshire, New York, or Rhode Island) ZIP codes are set to zeros (0s) and the state is removed.

TemporaryPatientZIPCode

Short Description Patient's ZIP code
Primary Table: Visit
Availability to users: GOV
Type of Data: ZIP code
Format: Varchar
Length: 5

Description: ZIP code of patient's temporary Massachusetts address. CHIA does not alter or standardize the values in this field.

TotalEDBeds

Short Description Total number of ED beds for a facility-submission-quarter.
Primary Table: ServiceSummary
Availability to users: CORE
Type of Data: Continuous
Description: Sum of all possible ED beds in the facility.

TotalCharges

Short Description Total charges associated with ED visits in a Facility-Submission-Quarter.
Primary Table: Service
Linking tables: Service
 SubmissionLog
Availability to users: CORE
Type of Data: Continuous
Description: Sum of charges for the visit.

TotalRegisteredVisits

Short Description Total number of ED visits for a facility in a quarter.
Primary Table: ServiceSummary
Availability to users: CORE
Type of Data: Continuous
Description: Total number of ED visits for a facility in a quarter.

Transport

Short Description How the patient reached the ED.
Primary Table: Visit
Availability to users: CORE
Type of Data: Categorical
Description: The patient's mode of transport to the emergency department.
Summary Statistics: Table 16

TreatmentBeds

Short Description Number of beds in ED facility.
Primary Table: ServiceSummary
Availability to users: CORE
Type of Data: Continuous
Description: Unique identifier for ED facility. Linkage across tables and fiscal years. This data element measures the normal capacity of emergency departments. ED Treatment Beds include only those beds in the emergency department that are set up and equipped on a permanent basis to treat patients. It does not include the temporary use of gurneys, stretchers, etc. Including stretchers, etc. would overestimate facilities' physical capacity to comfortably treat a certain volume of emergency department patients, although CHIA recognizes that in cases of overcrowding, emergency departments may need to employ temporary beds.

Type

Short Description Indicates the type of facility where visit occurred.
Primary Table: Organization
Availability to users: CORE
Type of Data: Categorical
Description: Categorizes emergency rooms by facility type.

TypeofVisit

Short Description Indicates the type of visit.
Primary Table: Visit
Availability to users: CORE
Type of Data: Categorical
Description: Facilities indicate whether the visit was Emergency, Urgent, Non-Urgent, Newborn, or Unavailable.

Summary statistics: Table 17

Reference table:

| CODE | DESCRIPTION |
|------|-------------------------|
| 1 | Emergency |
| 2 | Urgent |
| 3 | Non-Urgent |
| 4 | Newborn |
| 5 | Information Unavailable |

VisitPassed

| | |
|-------------------------------|-------------|
| Short Description | CHIA flag. |
| Primary Table: | Visit |
| Availability to users: | CORE |
| Type of Data: | Categorical |
| CHIA derived: | Yes |

VisitSequence

| | |
|-------------------------------|--|
| Description | CHIA flag. Used for processing |
| Short description: | Order in which visits occurred for a patient. |
| Primary Table: | Visit |
| Availability to users: | LDS |
| Type of Data: | Ordinal |
| CHIA derived: | Yes |
| Description: | This calculated field indicates the chronological order of ED visits for patients with multiple ED visits. A match with the UHIN only, is used to make the determination that a patient has had multiple visits. The Sequence Number uses the following data conventions: (1) The sequence number is calculated by sorting the file by UHIN and visit date (in ascending order). (2) The sequence number is then calculated by incrementing a counter for each UHIN's set of visits. A sequence number of "1" indicates the first admission for the UHIN in that fiscal year. (3) If a UHIN has two visits on the same day, the visit date is used as the secondary sort key. (4) If the UHIN is undefined (not reported, unknown or invalid), the sequence number is set to zero. |

Year

| | |
|-------------------------------|---------------------------------------|
| Short description | Indicates year of submission. |
| Primary Table: | Visit |
| Availability to users: | CORE |
| Type of Data: | Date |
| Format: | YY |
| Description: | Calendar Year the data was submitted. |

Longer Reference Tables

FY2020 EDD has 20 standard reference tables. These relate to categorical variables driven by the Emergency Department Data Submission Guide. Some of the tables have been integrated into the data dictionary. This section contains longer tables used by multiple data elements. Users of the data with additional questions about any specific Reference table should contact CHIA at CaseMix.data@state.ma.us.

Table 2. VISIT SOURCE

Data Elements: SourceOfVisit
SecondarySourceofVisit

Rules: All other values are invalid
Newborns have a special source of visit table (see below).

| CODE | DESCRIPTION |
|------|--|
| 0 | Information Not Available |
| 1 | Direct Physician Referral |
| 2 | Within Hospital Clinic Referral |
| 3 | Direct Health Plan Referral/HMO Referral |
| 4 | Transfer from Acute Care Hospital |
| 5 | Transfer from a Skilled Nursing Facility (SNF) |
| 6 | Transfer from Intermediate Care Facility (ICF) |
| 7 | Outside Hospital Emergency Room Transfer |
| 8 | Court/Law Enforcement |
| 9 | Other |
| F | Transfer from a Hospice Facility |
| L | Outside Hospital Clinic Referral |
| M | Walk-In/Self-Referral |
| T | Transfer from Another Institution's Ambulatory Surgery (SDS) |
| Y | Within Hospital Ambulatory Surgery Transfer (SDS Transfer) |
| E | EMS Transport |

| SRCVISIT CODE | FOR NEWBORN |
|---------------|-------------------------------------|
| Z | Information Not Available – Newborn |
| A | Normal Delivery |
| B | Premature Delivery |
| C | Sick Baby |
| D | Extramural Birth |

Table 3. CONDITION PRESENT

Principal Data Element: PrimaryConditionPresent

Other Data Elements: ConditionPresent
ConditionPresentECode

Rules: All other values invalid.

Last Updated: 1/31/2018

| CODE | DESCRIPTION |
|---------|---|
| Y | Yes |
| N | No |
| U | Unknown |
| W | Clinically undetermined |
| 1 | Not applicable (only valid for NCHS official published list of not applicable ICD-9-CM or ICD-10-CM codes for POA flag) |
| [Blank] | Not applicable (only valid for NCHS official published list of not applicable ICD-9-CM or ICD-10-CM codes for POA flag) |

Table 4. PAYER TYPE

Data Elements: Payer Type
ManagedCareCode
MCareMCaidPrivCode

Rules: All other values are invalid

| PAYER TYPE CODE | PAYER TYPE ABBREVIATION | PAYER TYPE DEFINITION |
|-----------------|-------------------------|---|
| 1 | SP | Self-Pay |
| 2 | WOR | Worker's Compensation |
| 3 | MCR | Medicare |
| F | MCR-MC | Medicare Managed Care |
| 4 | MCD | Medicaid |
| B | MCD-MC | Medicaid Managed Care |
| 5 | GOV | Other Government Payment |
| 6 | BCBS | Blue Cross |
| C | BCBS-MC | Blue Cross Managed Care |
| 7 | COM | Commercial Insurance |
| D | COM-MC | Commercial Managed Care |
| 8 | HMO | HMO |
| 9 | FC | Free Care |
| 0 | OTH | Other Non-Managed Care Plans |
| E | PPO | PPO and Other Managed Care Plans Not Elsewhere Classified |
| H | HSN | Health Safety Net |
| J | POS | Point-of-Service Plan |
| K | EPO | Exclusive Provider Organization |
| T | AI | Auto Insurance |
| Q | ComCare | Commonwealth Care/ConnectorCare Plans |

| PAYER TYPE CODE | PAYER TYPE ABBREVIATION | PAYER TYPE DEFINITION |
|-----------------|-------------------------|---------------------------------------|
| Z | DEN | Dental Plans |
| N | None | None (Valid only for Secondary Payer) |

Table 5. PAYER SOURCE

Data Elements: PayerSourceCode
PayerSourceDefinition
SecondarySourceOfPayment
PayerCategory
PrimarySourceOfPayment

Rules: All other values are invalid
Some codes are valid as Secondary Source of Payment

Refer to complete listing at: [CHIA Payer Source Codes](#)

Table 6. STATE

Data Elements: PermanentPatientStateLDS
TemporaryPatientStateLDS

Rules: All other values are invalid
Must be present when Patient Country is 'US'
Must be valid U.S. postal code for state

| CODE | DESCRIPTION |
|------|---------------|
| CT | Connecticut |
| ME | Maine |
| MA | Massachusetts |
| NH | New Hampshire |
| NY | New York |
| RI | Rhode Island |
| VT | Vermont |

Note: The LDS includes only the states listed above. The default code of XX is used for any other state or U.S. possession.

Part D. Data Notes

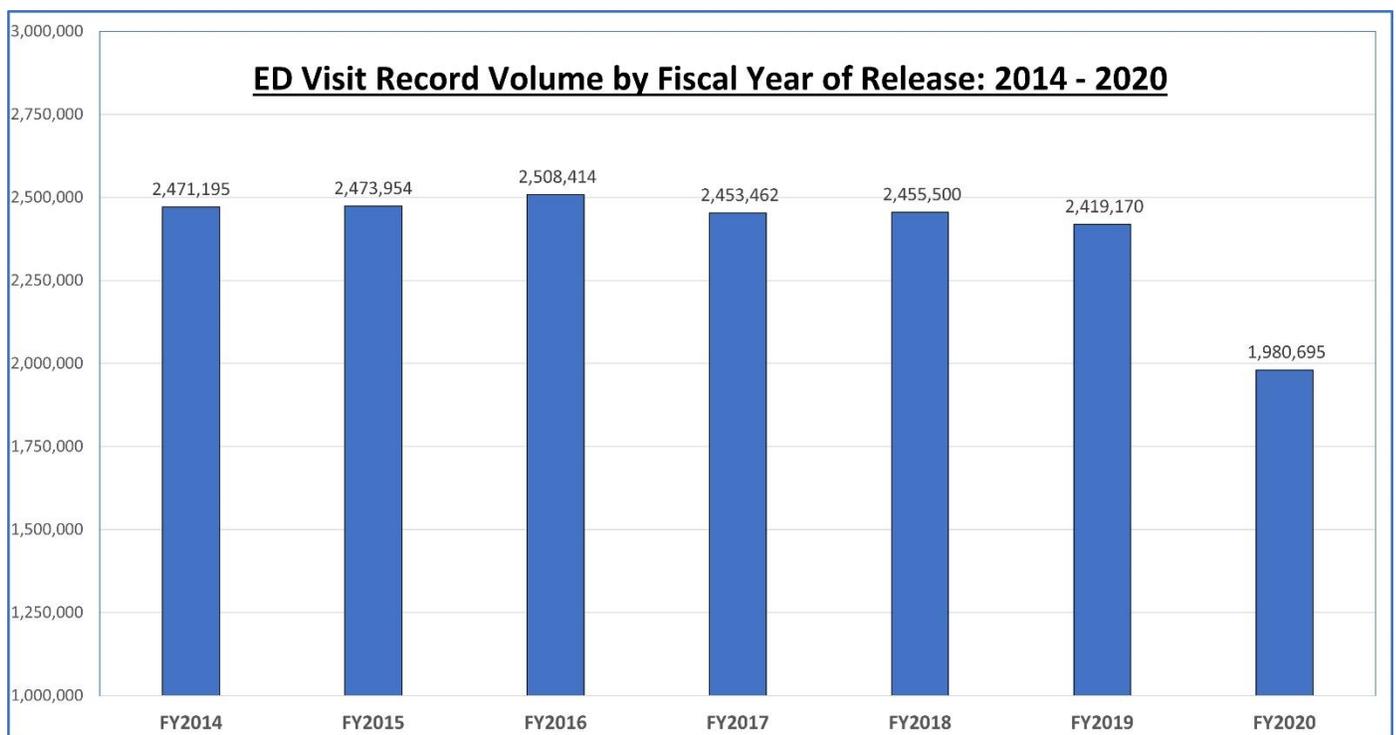
At the time of this publication the following data notes were present. As data findings occur, CHIA will update the FY20 EDD Release Notes published on the CHIA website at <https://www.chiamass.gov/case-mix-data/>. Data notes will not be regularly updated in this Documentation Manual.

- North Shore Medical Center – Union Hospital Campus (Org Id 3) permanently closed on November 3, 2019. Union Hospital based services were consolidated to the North Shore Medical Center - Salem Hospital facility (Org Id 116). Emergency Department Visit data is only reported for the applicable FY20 Quarter 1 timeframe.
- Cambridge Health Alliance closed their Emergency Department at Somerville Hospital (Org Id 143) on April 30, 2020. Emergency Department Visit data is only reported for the first three quarters of FY20.
- Steward Norwood Hospital (Org Id 41) temporarily closed on June 29, 2020 due to flooding. Emergency Department Visit data is only reported for the first three quarters of FY20.

Prior to releasing the Final FY2020 EDD, CHIA provides the hospitals with a profile of the data submitted. Providers may resubmit data or provide written feedback to CHIA. Below is a summary of some of the key feedback received:

- Signature Healthcare Brockton Hospital (Org Id 25):
 - Noted discrepancies with Patient Homeless Status for all quarters of FY20. Due to a mapping issue, no patients were identified as homeless. This finding was discovered too late for data resubmissions but has been corrected for FY21.

The Final FY2020 EDD release contains a lower volume of visit records than previous years.



Data users should update their ICD-10-CM/PCS lookup tables to include new FY2020 diagnosis codes downloadable from CMS at: <https://www.cms.gov/Medicare/Coding/ICD10/2020-ICD-10-CM>

The Final FY2020 EDD release contains ICD-10-CM U-codes not used in previous years.

ED Visit Record Volume Frequency by ICD-10-CM Major Diagnosis Categories for FY2018 to FY2020

| MDC | Definition | FY2018 Frequency | FY2019 Frequency | FY2020 Frequency |
|---------|---|------------------|------------------|------------------|
| A00-B99 | Certain infectious and parasitic diseases | 2.42% | 2.33% | 2.35% |
| C00-D49 | Neoplasms | 0.16% | 0.17% | 0.18% |
| D50-D89 | Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism | 0.28% | 0.30% | 0.31% |
| E00-E89 | Endocrine, nutritional and metabolic diseases | 1.18% | 1.20% | 1.21% |
| F01-F99 | Mental, Behavioral and Neurodevelopmental disorders | 6.75% | 6.65% | 6.99% |
| G00-G99 | Diseases of the nervous system | 2.07% | 2.07% | 1.90% |
| H00-H59 | Diseases of the eye and adnexa | 1.45% | 1.46% | 1.32% |
| H60-H95 | Diseases of the ear and mastoid process | 1.92% | 1.85% | 1.58% |
| I00-I99 | Diseases of the circulatory system | 2.05% | 2.11% | 2.27% |
| J00-J99 | Diseases of the respiratory system | 9.32% | 9.10% | 8.74% |
| K00-K95 | Diseases of the digestive system | 5.11% | 5.17% | 5.16% |
| L00-L99 | Diseases of the skin and subcutaneous tissue | 3.84% | 3.68% | 3.40% |
| M00-M99 | Diseases of the musculoskeletal system and connective tissue | 8.41% | 8.30% | 7.76% |
| N00-N99 | Diseases of the genitourinary system | 4.59% | 4.58% | 4.60% |
| O00-O9A | Pregnancy, childbirth and the puerperium | 1.89% | 1.95% | 1.99% |
| P00-P96 | Certain conditions originating in the perinatal period | 0.09% | 0.10% | 0.09% |
| Q00-Q99 | Congenital malformations, deformations and chromosomal abnormalities | 0.03% | 0.03% | 0.02% |
| R00-R99 | Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified | 23.02% | 24.31% | 25.13% |
| S00-T88 | Injury, poisoning and certain other consequences of external causes | 23.16% | 22.45% | 21.61% |
| U00-U85 | Codes for special purposes | | | 0.70% |
| Z00-Z99 | Factors influencing health status and contact with health services | 2.24% | 2.21% | 2.69% |
| | Blank | 0.01% | 0.01% | 0.01% |